

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

Attorney Docket No. 1502-88CON

First Inventor William F. Avrin

Title Simplified Water-Bag Technique for Magnetic Susceptibility  
Measurements on the Human Body and Other Specimens

Express Mail Label No. EL677367296US

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2. ☒ Applicant claims small entity status.  
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 44]  
(preferred arrangement set forth below)
- Descriptive title of the invention
  - Cross References to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the invention
  - Brief Summary of the invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 14]
5. Oath or Declaration [Total Pages 3]
- a. ☒ Unexecuted
- b. ☐ Copy from a prior application (37 CFR 1.63 (d))  
(for a continuation/divisional with Box 18 completed)
- i. ☐ DELETION OF INVENTOR(S)  
Signed statement attached deleting inventor(s)  
named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)
6. ☐ Application Data Sheet. See 37 CFR 1.76

**ADDRESS TO:**Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231**ACCOMPANYING APPLICATIONS PARTS**

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 C.F.R. §3.73(b) Statement ☐ Power of Attorney  
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
16. ☐ Request and Certification under 35 U.S.C. 122  
(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☐ Other: \_\_\_\_\_

18. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☒ Continuation-in-part (CIP)

of prior application No: 09 / 135,890

Prior application information: Examiner E. Mantis Mercader

Group / Art Unit 3737

For **CONTINUATION** or **DIVISIONAL APPS** only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**17. CORRESPONDENCE ADDRESS**☒ Customer Number or Bar Code Label

00616

or ☐ Correspondence address below

(Insert Customer No. or Attach bar code label here)

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Country	US	Telephone	619.233.9004	Fax	619.544.1246

Name (Print/Type)	Lawrence A. Maxham	Registration No. (Attorney/Agent)	24,483
Signature		Date	27 March 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2001</h2> <p style="margin: 5px 0;"><i>Patent fees are subject to annual revision.</i></p>		<b>Complete if Known</b>	
<b>TOTAL AMOUNT OF PAYMENT</b> (\$) 795		Application Number	Unknown
		Filing Date	27 March 2001
		First Named Inventor	William F. Arvin
		Examiner Name	Unknown
		Group / Art Unit	Unknown
		Attorney Docket No	1502-88 COn

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)																																																																																																																																																																																																																														
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to</p> <p>Deposit Account Number: 02-0460</p> <p>Deposit Account Name: BAKER &amp; MAXHAM</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed:</p> <p><input checked="" type="checkbox"/> Check    <input type="checkbox"/> Credit card    <input type="checkbox"/> Money Order    <input type="checkbox"/> Other</p>	<p><b>3. 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SUBMITTED BY				Complete (if applicable)	
Name (Print/Type)	Lawrence A. Maxham	Registration No. (Attorney/Agent)	24,483	Telephone	619 233.9004
Signature				Date	27 March 2001

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